

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Sunnyville Adult Family Home/ Charly Collins	LICENSE NUMBER
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NOTE: The term “the home” refers to the adult family home / provider listed above.

The scope of care, services, and activities listed on this form may not reflect all required care and services the home must provide. The home may not be able to provide services beyond those disclosed on this form, unless the needs can be met through “reasonable accommodations.” The home may also need to reduce the level of care they are able to provide based on the needs of the residents already in the home. For more information on reasonable accommodations and the regulations for adult family homes, see [Chapter 388-76](#) of Washington Administrative Code.

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About the Home

1. PROVIDERS STATEMENT (OPTIONAL)

The optional provider's statement is free text description of the mission, values, and/or other distinct attributes of the home.

2. INITIAL LICENSING DATE

11/09/2007

3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:

N/A

4. SAME ADDRESS PREVIOUSLY LICENSED AS:

N/A

5. OWNERSHIP

- ☒ Sole proprietor
☐ Limited Liability Corporation
☐ Co-owned by:
☐ Other:

Personal Care

“Personal care services” means both physical assistance and/or prompting and supervising the performance of direct personal care tasks as determined by the resident's needs, and does not include assistance with tasks performed by a licensed health professional. (WAC 388-76-10000)

1. EATING

<p>If needed, the home may provide assistance with eating as follows:</p> <p>Set up, supervision, cueing and/or assistance, as needed.</p>
<p>2. TOILETING</p> <p>If needed, the home may provide assistance with toileting as follows:</p> <p>Set up, supervision and cueing, as needed.</p>
<p>3. WALKING</p> <p>If needed, the home may provide assistance with walking as follows:</p> <p>Constant one on one support is not available with one person on staff. However, one on one support is frequently available, if the resident is able to safely wait for assistance.</p>
<p>4. TRANSFERRING</p> <p>If needed, the home may provide assistance with transferring as follows:</p> <p>The home does not assist with two person transfers. Those in need of two person transfers will not be admitted for safety reasons.</p>
<p>5. POSITIONING</p> <p>If needed, the home may provide assistance with positioning as follows:</p> <p>The home is not equipped to position people throughout the night. Assistance with positioning could be offered, otherwise, on a case by case basis.</p>
<p>6. PERSONAL HYGIENE</p> <p>If needed, the home may provide assistance with personal hygiene as follows:</p> <p>Set up, supervision, cueing and/or assistance, as needed.</p>
<p>7. DRESSING</p> <p>If needed, the home may provide assistance with dressing as follows:</p> <p>Set up, supervision, cueing and/or assistance, as needed.</p>
<p>8. BATHING</p> <p>If needed, the home may provide assistance with bathing as follows:</p> <p>Set up, supervision, cueing and/or physical assistance, as needed.</p>
<p>9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE</p> <p>Does not admit two person transfers, extensive assistance with toileting/briefs, or 24 hr. awake staff.</p>
<p>Medication Services</p>
<p>If the home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications. (WAC 388-76-10430)</p>
<p>The type and amount of medication assistance provided by the home is:</p> <p>Any level of assistance as needed, as specified in care plan, with the exception of those services unable to be delegated by a licensed registered nurse. Services unable to be delegated include: sterile injections, sterile procedures, central line maintenance, and acts that require nursing judgment, and they will not be provided by this Home.</p>
<p>ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES</p> <p>Medication is kept in a locked cabinet and administered as prescribed.</p>

Skilled Nursing Services and Nurse Delegation

If the home identifies that a resident has a need for nursing care and the home is not able to provide the care per chapter 18.79 RCW, the home must contract with a nurse currently licensed in the state of Washington to provide the nursing care and service, or hire or contract with a nurse to provide nurse delegation. (WAC 388-76-10405)

The home provides the following skilled nursing services:

Only those delegated by a licensed registered nurse.

The home has the ability to provide the following skilled nursing services by delegation:

Application of topical medications, administration of prn medications, administration of medications with assistance.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

We provide only the necessary services that can be delegated by a licensed registered nurse.

Specialty Care Designations

We have completed DSHS approved training for the following specialty care designations:

- ☒ Developmental disabilities
- ☒ Mental illness
- ☒ Dementia

ADDITIONAL COMMENTS REGARDING SPECIALTY CARE DESIGNATIONS

The current makeup here is primarily DD. That's not to say we don't accept dementia, however we are very careful to not admit anyone who might not like the atmosphere. It's important everyone is comfortable in their home.

Staffing

The home's provider or entity representative must live in the home, or employ or have a contract with a resident manager who lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager is exempt from the requirement to live in the home if the home has 24-hour staffing coverage and a staff person who can make needed decisions is always present in the home. (WAC 388-76-10040)

- ☒ The provider lives in the home.
- ☐ A resident manager lives in the home and is responsible for the care and services of each resident at all times.
- ☐ The provider, entity representative, or resident manager does not live in the home but the home has 24-hour staffing coverage, and a staff person who can make needed decisions is always present in the home.

The normal staffing levels for the home are:

- ☐ Registered nurse, days and times: _____
- ☐ Licensed practical nurse, days and times: _____
- ☒ Certified nursing assistant or long term care workers, days and times: **One on premises at all times that residents are in the home.**
- ☐ Awake staff at night
- ☐ Other: _____

ADDITIONAL COMMENTS REGARDING STAFFING

Cultural or Language Access

The home must serve meals that accommodate cultural and ethnic backgrounds (388-76-10415) and provide informational materials in a language understood by residents and prospective residents (Chapter 388-76 various sections)

The home is particularly focused on residents with the following background and/or languages:

English is the only language spoken by staff. All cultural preferences will be respected, including holidays and religious observances.

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

The current religions practiced in the home are Christianity and Buddhism. All are welcome.

Medicaid

The home must fully disclose the home's policy on accepting Medicaid payments. The policy must clearly state the circumstances under which the home provides care for Medicaid eligible residents and for residents who become eligible for Medicaid after admission. (WAC 388-76-10522)

☐ The home is a private pay facility and does not accept Medicaid payments.

☒ The home will accept Medicaid payments under the following conditions:

Residents who convert from private pay status to Medicaid may be discharged if Medicaid award is less than 80% of private pay agreement. If it is determined the Resident will remain at the Adult Family Home, a new Admission Agreement will be made. The Adult Family Home requests at least 60 days prior notice when Residents convert from private pay to Medicaid.

ADDITIONAL COMMENTS REGARDING MEDICAID

The Medicaid rate will be set by agreement between the Home and Washington DSHS.

Activities

The home must provide each resident with a list of activities customarily available in the home or arranged for by the home (WAC 388-76-10530).

The home provides the following:

Cable TV, art supplies, reading materials, and games are provided, along with many seasonal activities.

ADDITIONAL COMMENTS REGARDING ACTIVITIES

Conflicting activity schedules make it difficult to plan far in advance. However, we do celebrate every birthday, as well as every holiday that any resident finds significant. We celebrate with decorations, food and gifts, when appropriate. We also like to bake/decorate holiday cookies, look at holiday lights, go to the movies, watch 4th of July fireworks, have bbqs, go bowling, and any other activity we think sounds fun.

Please Return the completed form electronically to AFHDisclosures@DSHS.WA.GOV

The form may also be returned by mail at:

RCS – Attn: Disclosure of Services

PO Box 45600

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